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(Revised 02/2003)

FORM 3 For An Authorized Committee Office Use Only NAME QF TYPE OR PRINT ▼ Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. hormaker for Florida 2018 ADDRESS (number and street) Check if different than previously reported. (ACC) **FEC IDENTIFICATION NUMBER** ▼ ZIP CODE CITY STATE STATE ▼ DISTRICT C 3. IS THIS **NEW AMENDED** REPORT OR (N) (A) TYPE OF REPORT (Choose One) (b) 12-Day PRE-Election Report for the: (a) Quarterly Reports: Primary (12P) General (12G) Runoff (12R) April 15 Quarterly Report (Q1) Convention (12C) Special (12S) July 15 Quarterly Report (Q2) in the October 15 Quarterly Report (Q3) Election on State of January 31 Year-End Report (YE) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Termination Report (TER) in the Election on State of 01'01 2014 2014 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.